

AMENDED IN ASSEMBLY AUGUST 7, 2000

AMENDED IN ASSEMBLY JUNE 20, 2000

AMENDED IN SENATE MAY 3, 2000

AMENDED IN SENATE MARCH 23, 2000

**SENATE BILL**

**No. 1596**

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**Introduced by Senator Ortiz  
(Principal coauthor: Senator Alpert)**

February 18, 2000

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An act to amend Sections 100330, 103850, and 103885 of the Health and Safety Code, relating to health.

LEGISLATIVE COUNSEL'S DIGEST

SB 1596, as amended, Ortiz. Health reporting: confidentiality of information.

Existing law provides for the confidentiality of certain records and other information procured by the State Department of Health Services in connection with morbidity and mortality studies, the Birth Defects Monitoring Program, and the statewide cancer reporting system. Existing law requires an authorized disclosure of this information to be made pursuant to an agreement that the information will be kept confidential.

This bill would revise and recast these provisions to expand the types of records to which these provisions apply to include medical and pathology records and records of health status, and to require that this information be used solely for statistical, scientific, and medical research purposes relating

to the cause of condition of health, except as specified, in accordance with prescribed procedures. The bill would require the confidentiality agreement to be in writing. It would also provide that any person who violates these provisions would be subject to civil and criminal penalties and other actions, and that further access to confidential information maintained by the department may be denied. By creating new crimes, this bill would impose a state-mandated local program.

*This bill would incorporate additional changes in Section 103885 of the Health and Safety Code, proposed by AB 48, to be operative only if AB 48 and this bill are both chaptered and become effective January 1, 2001, and this bill is chaptered last.*

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: yes.

*The people of the State of California do enact as follows:*

1 SECTION 1. Section 100330 of the Health and Safety  
2 Code is amended to read:  
3 100330. (a) All data including, but not limited to,  
4 medical and pathology records, records of health status,  
5 records of interviews, questionnaires, written reports,  
6 statements, notes, and memoranda procured by the  
7 department or by any other person, agency, or  
8 organization acting jointly with the department,  
9 including public or private colleges and universities, in  
10 connection with morbidity and mortality studies and  
11 research investigations to determine any cause or  
12 condition of health shall be confidential and shall be used  
13 solely for statistical, scientific, and medical research  
14 purposes relating to the cause or condition of health,  
15 except as otherwise provided in this section.



(b) Before the department discloses confidential data to any other person, agency, or organization acting jointly with the department, the requesting entity shall demonstrate to the department that the entity has established procedures and the ability to maintain the confidentiality of the information.

(c) All confidential data may be used by the department when necessary for the purpose of controlling nuisances dangerous to the public health including, but not limited to, communicable, contagious, and infectious diseases.

(d) Confidential data may be disclosed by the department to other local, state, or federal public health or environmental agencies, or to collaborating medical researchers, when the confidential information is necessary to carry out the duties of the agency or researcher in the investigation, control, or surveillance of disease, as determined by the department.

(e) Any disclosure authorized by this section shall include only the information necessary for the stated purpose of the requested disclosure, and shall be made only upon written agreement that the information will be kept confidential and will not be further disclosed without written authorization of the department.

(f) The furnishing of confidential data to the department or its authorized representative or to any other cooperating individual, agency, or organization in any study in accordance with this section shall not expose any person, agency, or entity furnishing data to liability and shall not be considered to be the violation of any privileged or confidential relationship.

(g) No part of the confidential data shall be available for subpoena nor shall it be disclosed, discoverable, or compelled to be produced in any civil, criminal, administrative, or other proceeding, nor shall these data be deemed admissible as evidence in any civil, criminal, administrative, or other tribunal or court for any reason.

(h) (1) Notwithstanding any other provision of law, any person who violates this section shall be subject to

1 civil and criminal penalties and other actions in  
2 accordance with Section 56.36 of the Civil Code.

3 (2) Any person who intentionally discloses  
4 confidential data to any third party, except as authorized  
5 in this section, may be denied further access to  
6 confidential data maintained by the department.

7 (i) Nothing in this section shall prohibit the  
8 publication by the department of reports and statistical  
9 compilations relating to morbidity and mortality studies  
10 that do not identify individual cases and sources of  
11 information or religious affiliations.

12 SEC. 2. Section 103850 of the Health and Safety Code  
13 is amended to read:

14 103850. (a) All information collected pursuant to this  
15 chapter shall be confidential and shall be used solely for  
16 the purposes provided in this chapter. Access to the  
17 information shall be limited to the department,  
18 authorized program staff, and persons with a valid  
19 scientific interest, who meet qualifications as determined  
20 by the director, who are engaged in demographic,  
21 epidemiological, or other similar studies related to health,  
22 and who agree, in writing, to maintain confidentiality,  
23 except as otherwise provided in this section.

24 (b) Confidential information may be disclosed to  
25 other local, state, or federal public health or  
26 environmental agencies, or to collaborating medical  
27 researchers, when the confidential information is  
28 necessary to carry out the purposes of this chapter.

29 (c) The department shall maintain an accurate record  
30 of all persons who are given access to the information in  
31 the system. The record shall include: the name of the  
32 person authorizing access; name, title, and organizational  
33 affiliation of persons given access; dates of access; and the  
34 specific purpose for which information is to be used. The  
35 record of access shall be open to public inspection during  
36 normal operating hours of the state department.

37 (d) All research proposed to be conducted by persons,  
38 agencies, or organizations other than the department and  
39 program staff, using the information in the system, shall  
40 first be reviewed and approved by the director and the



1 State Committee for the Protection of Human Subjects.  
2 Satisfaction of the terms of the director's rules for data  
3 access shall be deemed to establish a valid scientific  
4 interest for purposes of subdivision (a), entitling the  
5 researcher to review records collected pursuant to  
6 Section 103830 and to contact case subjects and controls.  
7 Before confidential information is disclosed to any other  
8 person, agency, or organization, the requesting entity  
9 shall demonstrate to the department that the entity has  
10 established the procedures and ability to maintain the  
11 confidentiality of the information.

12 (e) Any disclosure authorized by this section shall  
13 include only the information necessary for the stated  
14 purpose of the requested disclosure, and shall be made  
15 only upon written agreement that the information will be  
16 kept confidential and will not be further disclosed  
17 without written authorization of the department.

18 (f) The furnishing of confidential information to the  
19 department or its authorized representative or to any  
20 other cooperating individual, agency, or organization in  
21 any study in accordance with this section shall not expose  
22 any person, agency, or entity furnishing information to  
23 liability and shall not be considered to be the violation of  
24 any privileged or confidential relationship.

25 (g) Whenever the department, pursuing program  
26 objectives, deems it necessary to contact case subjects and  
27 controls, the department shall submit a protocol  
28 describing the research to the director and to the State  
29 Committee for the Protection of Human Subjects. Once  
30 a protocol is approved by that committee, the  
31 department shall be deemed to have established a bona  
32 fide research purpose, and shall be entitled to complete  
33 the approved project and contact case subjects and  
34 controls without securing any additional approvals or  
35 waivers from any entity.

36 (h) No part of the confidential information shall be  
37 available for subpoena nor shall it be disclosed,  
38 discoverable, or compelled to be produced in any civil,  
39 criminal, administrative, or other proceeding, nor shall  
40 this information be deemed admissible as evidence in any

1 civil, criminal, administrative, or other tribunal or court  
2 for any reason.

3 (i) Nothing in this section shall prohibit the  
4 publication by the department of reports and statistical  
5 compilations relating to birth defects, stillbirth, or  
6 miscarriage that do not in any way identify individual  
7 cases or individual sources of information.

8 (j) (1) Notwithstanding any other provision of law,  
9 any person who violates this section shall be subject to  
10 civil and criminal penalties and other actions in  
11 accordance with Section 56.36 of the Civil Code.

12 (2) Any person who discloses confidential data, in  
13 violation of a written agreement to maintain  
14 confidentiality, to any third party, except as authorized in  
15 this section, may be denied further access to confidential  
16 data maintained by the department.

17 SEC. 3. Section 103885 of the Health and Safety Code  
18 is amended to read:

19 103885. (a) The director shall establish a statewide  
20 system for the collection of information determining the  
21 incidence of cancer, using population-based tumor  
22 registries modeled after the Cancer Surveillance  
23 Program of Orange County. As of the effective date of this  
24 section, the director shall begin phasing in the statewide  
25 cancer reporting system. By July 1, 1988, all county or  
26 regional registries shall be implemented or initiated. By  
27 July 1, 1990, the statewide cancer reporting system shall  
28 be fully operational. Within 60 days of the effective date  
29 of this section, the director shall submit an  
30 implementation and funding schedule to the Legislature.

31 (b) The department may designate any demographic  
32 parts of the state as regional cancer incidence reporting  
33 areas and may establish regional cancer registries, with  
34 the responsibility and authority to carry out the intent of  
35 this section in designated areas. Designated regional  
36 registries shall provide, on a timely basis, cancer  
37 incidence data as designated by the state department to  
38 the department. The department may contract with an  
39 agency, including, but not limited to, a health systems  
40 agency, single county health department, multicounty

1 health department grouping, or nonprofit professional  
2 association, representing a designated cancer reporting  
3 region for the purposes of collecting and collating cancer  
4 incidence data.

5 (c) The director shall designate cancer as a disease  
6 required to be reported in the state or any demographic  
7 parts of the state in which cancer information is collected  
8 under this section. All cancers diagnosed or treated in the  
9 reporting area shall thereafter be reported to the  
10 representative of the department authorized to compile  
11 the cancer data, or any individual, agency, or  
12 organization designated to cooperate with that  
13 representative.

14 (d) (1) Any hospital or other facility providing  
15 therapy to cancer patients within an area designated as  
16 a cancer reporting area shall report each case of cancer  
17 to the department or the authorized representative of the  
18 department in a format prescribed by the department. If  
19 the hospital or other facility fails to report in a format  
20 prescribed by the department, the department's  
21 authorized representative may access the information  
22 from the hospital or the facility and report it in the  
23 appropriate format. In these cases, the hospital or other  
24 health facility shall reimburse the state department or the  
25 authorized representative for its cost to access and report  
26 the information.

27 (2) Any physician and surgeon, dentist, podiatrist, or  
28 other health care practitioner diagnosing or providing  
29 treatment for cancer patients shall report each cancer  
30 case to the department or the authorized representative  
31 of the department except for those cases directly referred  
32 to a treatment facility or those previously admitted to a  
33 treatment facility for diagnosis or treatment of that  
34 instance of cancer.

35 (e) Any hospital or other facility that is required to  
36 reimburse the department or its authorized  
37 representative for the cost to access and report the  
38 information pursuant to subdivision (d) shall provide  
39 payment to the department or its authorized  
40 representative within 60 days of the date this payment is

1 demanded. In the event any hospital or other facility fails  
2 to make the payment to the department or its authorized  
3 representative within 60 days of the date the payment is  
4 demanded, the department or its authorized  
5 representative may, at its discretion, assess a late fee not  
6 to exceed 1½ percent per month of the outstanding  
7 balance. Further, in the event that the department or its  
8 authorized representative takes a legal action to recover  
9 its costs and any associated fees, and the department or  
10 its authorized representative receives a judgment in its  
11 favor, the hospital or other facility shall also reimburse the  
12 department or its authorized representative for any  
13 additional costs it incurred to pursue the legal action.  
14 Late fees and payments made to the department by  
15 hospitals or other facilities pursuant to this subdivision  
16 shall be considered as reimbursements of the additional  
17 costs incurred by the department.

18 (f) All physicians and surgeons, hospitals, outpatient  
19 clinics, nursing homes and all other facilities, individuals  
20 or agencies providing diagnostic or treatment services to  
21 patients with cancer shall grant to the department or the  
22 authorized representative access to all records that would  
23 identify cases of cancer or would establish characteristics  
24 of the cancer, treatment of the cancer, or medical status  
25 of any identified cancer patient. Willful failure to grant  
26 access to those records shall be punishable by a fine of up  
27 to five hundred dollars (\$500) each day access is refused.  
28 Any fines collected pursuant to this subdivision shall be  
29 deposited in the General Fund.

30 (g) (1) All data including, but not limited to, medical  
31 and pathology records, records of health status,  
32 interviews, questionnaires, reports, statements, notes,  
33 and memoranda collected pursuant to this section shall be  
34 confidential. Access shall be limited to the department  
35 and any regional registry designated by the department  
36 except as otherwise provided in this subdivision.

37 (2) The department and any regional cancer registry  
38 designated by the department may enter into  
39 agreements to furnish confidential data to other states'  
40 cancer registries, federal cancer control agencies, local



1 health officers, or health researchers for the purposes of  
2 determining the sources of malignant neoplasms and  
3 evaluating measures designed to eliminate, alleviate, or  
4 ameliorate their effect. Before confidential data are  
5 disclosed to those out-of-state registries, agencies,  
6 officers, or researchers, the requesting entity shall agree  
7 in writing to maintain the confidentiality of the  
8 information, and, in the case of researchers, shall do both  
9 of the following:

10 (A) Obtain approval of their committee for the  
11 protection of human subjects established in accordance  
12 with Part 46 (commencing with Section 46.101) of Title  
13 45 of the Code of Federal Regulations.

14 (B) Provide documentation to the department that  
15 demonstrates to the department's satisfaction that the  
16 entity has established the procedures and ability to  
17 maintain the confidentiality of the information.

18 (3) Confidential data may be disclosed to other local,  
19 state, or federal public health or environmental agencies,  
20 or to collaborating medical researchers, when the  
21 confidential data are necessary to carry out the duties of  
22 the agency or researcher in the investigation, control, or  
23 surveillance of disease, as determined by the department.

24 (4) Any disclosure authorized by this section shall  
25 include only the information necessary for the stated  
26 purpose of the requested disclosure and shall be made  
27 only upon written agreement that the information will be  
28 kept confidential and will not be further disclosed  
29 without written authorization of the department.

30 (5) The furnishing of confidential data to the  
31 department or its authorized representative or to any  
32 other cooperating individual, agency, or organization in  
33 any study in accordance with this subdivision shall not  
34 expose any person, agency, or entity furnishing data to  
35 liability and shall not be considered to be the violation of  
36 any privileged or confidential relationship.

37 (6) No part of the confidential data shall be available  
38 for subpoena nor shall it be disclosed, discoverable, or  
39 compelled to be produced in any civil, criminal,  
40 administrative, or other proceeding, nor shall these data

1 be deemed admissible as evidence in any civil, criminal,  
2 administrative, or other tribunal or court for any reason.

3 (7) (A) Notwithstanding any other provision of law,  
4 any person who violates this subdivision shall be subject  
5 to civil and criminal penalties and other actions in  
6 accordance with Section 56.36 of the Civil Code.

7 (B) Any person who intentionally discloses  
8 confidential data to any third party, except as authorized  
9 in this subdivision, may be denied further access to  
10 confidential data maintained by the department.

11 (8) Nothing in this subdivision shall prohibit the  
12 publication by the department of reports and statistical  
13 compilations relating to the causes of malignant  
14 neoplasms or measures to eliminate, alleviate, or  
15 ameliorate the effect of malignant neoplasms that do not  
16 identify individual cases and sources of information or  
17 religious affiliations.

18 (h) For the purpose of this section, “cancer” means all  
19 malignant neoplasms, regardless of the tissue of origin,  
20 including malignant lymphoma, Hodgkins disease, and  
21 leukemia, but excluding basal cell and squamous cell  
22 carcinoma of the skin.

23 (i) Nothing in this section shall preempt the authority  
24 of facilities or individuals, providing diagnostic or  
25 treatment services to patients with cancer, to maintain  
26 their own facility-based tumor registries.

27 (j) It is the intent of the Legislature that the  
28 department, in establishing a system pursuant to this  
29 section, maximize the use of available federal funds.

30 SEC. 4. *Section 103885 of the Health and Safety Code*  
31 *is amended to read:*

32 103885. (a) The director shall establish a statewide  
33 system for the collection of information determining the  
34 incidence of cancer, using population-based ~~tumor~~  
35 *cancer* registries modeled after the Cancer Surveillance  
36 Program of Orange County. As of the effective date of this  
37 section, the director shall begin phasing in the statewide  
38 cancer reporting system. By July 1, 1988, all county or  
39 regional registries shall be implemented or initiated. By  
40 July 1, 1990, the statewide cancer reporting system shall

1 be fully operational. Within 60 days of the effective date  
2 of this section, the director shall submit an  
3 implementation and funding schedule to the Legislature.

4 (b) The department may designate any demographic  
5 parts of the state as regional cancer incidence reporting  
6 areas and may establish regional cancer registries, with  
7 the responsibility and authority to carry out the intent of  
8 this section in designated areas. Designated regional  
9 registries shall provide, on a timely basis, cancer  
10 incidence data as designated by the state department to  
11 the department. The department may contract with an  
12 agency, including, but not limited to, a health systems  
13 agency, single county health department, multicounty  
14 health department grouping, or nonprofit professional  
15 association, representing a designated cancer reporting  
16 region for the purposes of collecting and collating cancer  
17 incidence data.

18 (c) The director shall designate cancer as a disease  
19 required to be reported in the state or any demographic  
20 parts of the state in which cancer information is collected  
21 under this section. All cancers diagnosed or treated in the  
22 reporting area shall thereafter be reported to the  
23 representative of the department authorized to compile  
24 the cancer data, or any individual, agency, or  
25 organization designated to cooperate with that  
26 representative.

27 (d) (1) Any hospital or other facility providing  
28 therapy to cancer patients within an area designated as  
29 a cancer reporting area shall report each case of cancer  
30 to the department or the authorized representative of the  
31 department in a format prescribed by the department. If  
32 the hospital or other facility fails to report in a format  
33 prescribed by the department, the department's  
34 authorized representative may access the information  
35 from the hospital or the facility and report it in the  
36 appropriate format. In these cases, the hospital or other  
37 health facility shall reimburse the state department or the  
38 authorized representative for its cost to access and report  
39 the information.

1 (2) Any physician and surgeon, dentist, podiatrist, or  
2 other health care practitioner diagnosing or providing  
3 treatment for cancer patients shall report each cancer  
4 case to the department or the authorized representative  
5 of the department except for those cases directly referred  
6 to a treatment facility or those previously admitted to a  
7 treatment facility for diagnosis or treatment of that  
8 instance of cancer.

9 (e) Any hospital or other facility that is required to  
10 reimburse the department or its authorized  
11 representative for the cost to access and report the  
12 information pursuant to subdivision (d) shall provide  
13 payment to the department or its authorized  
14 representative within 60 days of the date this payment is  
15 demanded. In the event any hospital or other facility fails  
16 to make the payment to the department or its authorized  
17 representative within 60 days of the date the payment is  
18 demanded, the department or its authorized  
19 representative may, at its discretion, assess a late fee not  
20 to exceed  $1\frac{1}{2}$  percent per month of the outstanding  
21 balance. Further, in the event that the department or its  
22 authorized representative takes a legal action to recover  
23 its costs and any associated fees, and the department or  
24 its authorized representative receives a judgment in its  
25 favor, the hospital or other facility shall also reimburse the  
26 department or its authorized representative for any  
27 additional costs it incurred to pursue the legal action.  
28 Late fees and payments made to the department by  
29 hospitals or other facilities pursuant to this subdivision  
30 shall be considered as reimbursements of the additional  
31 costs incurred by the department.

32 (f) All physicians and ~~surgeon~~ *surgeons*, hospitals,  
33 outpatient clinics, nursing homes and all other facilities,  
34 individuals or agencies providing diagnostic or treatment  
35 services to patients with cancer shall grant to the  
36 department or the authorized representative access to all  
37 records that would identify cases of cancer or would  
38 establish characteristics of the cancer, treatment of the  
39 cancer, or medical status of any identified cancer patient.  
40 Willful failure to grant access to those records shall be

punishable by a fine of up to five hundred dollars (\$500) each day access is refused. Any fines collected pursuant to this subdivision shall be deposited in the General Fund.

(g) ~~All information reported~~—(1) *All data including, but not limited to, medical and pathology records, records of health status, interviews, questionnaires, reports, statements, notes, and memoranda collected pursuant to this section shall be confidential as provided in Section 100330, except that confidential. Access shall be limited to the department and any regional cancer registry designated by the department shall use the information to determine except as otherwise provided in this subdivision the sources of malignant neoplasms and evaluate measures designed to eliminate, alleviate, or ameliorate their effect.*

(2) The department and any regional cancer registry designated by the department may enter into agreements to furnish confidential ~~information~~ data to other states' cancer registries, federal cancer control agencies, local health officers, or health researchers for the purposes ~~set forth in this subdivision~~ if of determining the sources of malignant neoplasms and evaluating measures designed to eliminate, alleviate, or ameliorate their effect. Before confidential data are disclosed to those out-of-state registries, agencies, officers, or researchers, the requesting entity shall agree in writing to maintain the confidentiality of the information, and, in the case of researchers, ~~if they have obtained the~~ shall do both of the following:

(A) Obtain approval of their committee for the protection of human subjects established in accordance with Part 46 (commencing with Section 46.101) of Title 45 of the Code of Federal Regulations.

(B) Provide documentation to the department that demonstrates to the department's satisfaction that the entity has established the procedures and ability to maintain the confidentiality of the information.

(3) Confidential data may be disclosed to other local, state, or federal public health or environmental agencies, or to collaborating medical researchers, when the

1 *confidential data are necessary to carry out the duties of*  
2 *the agency or researcher in the investigation, control, or*  
3 *surveillance of disease, as determined by the department.*

4 (4) *Any disclosure authorized by this section shall*  
5 *include only the information necessary for the stated*  
6 *purpose of the requested disclosure and shall be made*  
7 *only upon written agreement that the information will be*  
8 *kept confidential and will not be further disclosed*  
9 *without written authorization of the department.*

10 (5) *The furnishing of confidential data to the*  
11 *department or its authorized representative or to any*  
12 *other cooperating individual, agency, or organization in*  
13 *any study in accordance with this subdivision shall not*  
14 *expose any person, agency, or entity furnishing data to*  
15 *liability and shall not be considered to be the violation of*  
16 *any privileged or confidential relationship.*

17 (6) *No part of the confidential data shall be available*  
18 *for subpoena nor shall it be disclosed, discoverable, or*  
19 *compelled to be produced in any civil, criminal,*  
20 *administrative, or other proceeding, not shall these data*  
21 *be deemed admissible as evidence in any civil, criminal,*  
22 *administrative, or other tribunal or court for any reason.*

23 (7) (A) *Notwithstanding any other provision of law,*  
24 *any person who violates this subdivision shall be subject*  
25 *to civil and criminal penalties and other actions in*  
26 *accordance with Section 56.36 of the Civil Code.*

27 (B) *Any person who intentionally discloses*  
28 *confidential data to any third party, except as authorized*  
29 *in this subdivision, may be denied further access to*  
30 *confidential data maintained by the department.*

31 (8) *Nothing in this subdivision shall prohibit the*  
32 *publication by the department of reports and statistical*  
33 *compilations relating to the causes of malignant*  
34 *neoplasms or measures to eliminate, alleviate, or*  
35 *ameliorate the effect of malignant neoplasms that do not*  
36 *identify individual cases and sources of information or*  
37 *religious affiliations.*

38 (h) *For the purpose of this section, “cancer” means all*  
39 *either of the following:*

1 (1) All malignant neoplasms, regardless of the tissue  
2 of origin, including malignant lymphoma, Hodgkins  
3 disease, and leukemia, but excluding basal cell and  
4 squamous cell carcinoma of the skin.

5 (2) All primary intracranial and central nervous  
6 system (CNS) tumors occurring in the following sites,  
7 irrespective of histologic type: brain, meninges, spinal  
8 cord, caudae equina, cranial nerves and other parts of the  
9 CNS, pituitary gland, pineal gland, and craniopharyngeal  
10 duct.

11 (i) Nothing in this section shall preempt the authority  
12 of facilities or individuals, providing diagnostic or  
13 treatment services to patients with cancer, to maintain  
14 their own facility-based ~~tumor~~ cancer registries.

15 (j) It is the intent of the Legislature that the  
16 department, in establishing a system pursuant to this  
17 section, maximize the use of available federal funds.

18 SEC. 5. Section 4 of this bill incorporates  
19 amendments to Section 103885 of the Health and Safety  
20 Code proposed by both this bill and AB 48. It shall only  
21 become operative if (1) both bills are enacted and  
22 become effective on or before January 1, 2001, (2) each  
23 bill amends Section 103885 of the Health and Safety Code,  
24 and (3) this bill is enacted after AB 48, in which case  
25 Section 3 of this bill shall not become operative.

26 SEC. 6. No reimbursement is required by this act  
27 pursuant to Section 6 of Article XIII B of the California  
28 Constitution because the only costs that may be incurred  
29 by a local agency or school district will be incurred  
30 because this act creates a new crime or infraction,  
31 eliminates a crime or infraction, or changes the penalty  
32 for a crime or infraction, within the meaning of Section  
33 17556 of the Government Code, or changes the definition  
34 of a crime within the meaning of Section 6 of Article  
35 XIII B of the California Constitution.